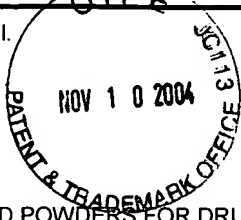


**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: Weers et al.  Application No: 09/851,226 Confirmation No: 4017  Filed: 05/08/2001  Title: PHOSPHOLIPID-BASED POWDERS FOR DRUG DELIVERY	Group No: 1617  Examiner: Lauren Q. Wells  Attorney Docket No: NK.0073.00  Friday, November 05, 2004 San Francisco, CA 94107
---	---



Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	<b>Extension of Time</b> <input checked="" type="checkbox"/> Applicant petitions for an extension of time under 37 C.F.R. 1.136																
<b>Papers Enclosed</b>  <input checked="" type="checkbox"/> Amendment in Response to Final Office Action <input checked="" type="checkbox"/> Statement under 37 CFR 3.73(b) (form PTO/SB96) <input checked="" type="checkbox"/> Associate Power of Attorney Statement <input checked="" type="checkbox"/> Notice of Appeal (form PTO/SB31) <input type="checkbox"/> Drawings <input type="checkbox"/> Supplemental Information Disclosure Statement <input type="checkbox"/> PTO-SB08 Form <input type="checkbox"/> Citations <input type="checkbox"/> Terminal Disclaimer <input checked="" type="checkbox"/> Postcard for Return (1)	Extension (Months)	<table border="1"> <tr> <th colspan="2">Extension Fee</th> </tr> <tr> <th>Large Entity</th> <th>Small Entity</th> </tr> <tr> <td><input type="checkbox"/> One Month</td> <td>\$110.00</td> <td>\$55.00</td> </tr> <tr> <td><input type="checkbox"/> Two Months</td> <td>\$430.00</td> <td>\$215.00</td> </tr> <tr> <td><input checked="" type="checkbox"/> Three Months</td> <td>\$980.00</td> <td>\$490.00</td> </tr> <tr> <td align="center" colspan="2"><b>Total \$ 980.00</b></td> </tr> </table>	Extension Fee		Large Entity	Small Entity	<input type="checkbox"/> One Month	\$110.00	\$55.00	<input type="checkbox"/> Two Months	\$430.00	\$215.00	<input checked="" type="checkbox"/> Three Months	\$980.00	\$490.00	<b>Total \$ 980.00</b>	
	Extension Fee																
	Large Entity	Small Entity															
	<input type="checkbox"/> One Month	\$110.00	\$55.00														
	<input type="checkbox"/> Two Months	\$430.00	\$215.00														
<input checked="" type="checkbox"/> Three Months	\$980.00	\$490.00															
<b>Total \$ 980.00</b>																	
<input type="checkbox"/> Applicant believes that no extension of term is required. However, this conditional petition is being made in case applicant has inadvertently overlooked the need for a petition for extension of time.																	

Fees for Extra Claims						
	Claims remaining after amendment	Highest number previously paid for	Number Extra	Rate		Additional Fee
				Large Entity	Small Entity	
Total Claims	60	59*	1	\$18.00	\$9.00	\$18.00
Independent Claims	5	5	0	\$88.00	\$44.00	\$0.00
Multiple Dependent Claims			0	\$300.00	\$150.00	\$0.00
Supplemental Information Disclosure Statement						
Total						\$18.00

\*No news claims in the present amendment, but claims were miscounted in the last amendment transmittal

<b>Fee Payment</b>		<b>Fee Deficiency</b> <input checked="" type="checkbox"/> If any additional extension and/or fee is required, please charge Deposit Account No. <u>10-0258</u> . and/or <input checked="" type="checkbox"/> If any additional fee for claims is required, please charge Deposit Account No. <u>10-0258</u> .	
Extension Fees	\$980.00	Please direct telephone calls to: Ashok K. Janah at (415) 538-1555 Please continue to send correspondence to: Guy Tucker Nektar Therapeutics 150 Industrial Road San Carlos, CA 94070.	
Fees for Extra Claims	\$18.00		
Notice of Appeal Fee	\$340.00		
Total	\$1,338.00		
<input type="checkbox"/> Attached is check no. _____ in the sum of \$0.00. <input checked="" type="checkbox"/> Please charge Deposit Account No. <u>10-0258</u> in the sum of \$ <u>1,338.00</u> .		Respectfully Submitted,  <div style="display: flex; justify-content: space-between;"> <div>                     By:                       Hilde Susan Jaegtnes                 </div> <div>                     By:                       Ashok K. Janah                      Registration No. 37,487                 </div> </div>	
<b>CERTIFICATE OF TRANSMISSION (37 C.F.R. § 1.8a):</b>  I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		Date: <u>November 5, 2004</u>	